

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213537158						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: E*TRADE Financial Corporation</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street</p> <p>RICHMOND, VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 8/31/2013</p> <p>SCC ID NO: F1801234</p> </div> </div>								
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: RICHMOND CITY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: DE</p> </div> <div style="width: 35%;"> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>400,000,000</td> </tr> <tr> <td>PREFER</td> <td>1,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	400,000,000	PREFER	1,000,000
CLASS	AUTHORIZED							
COMMON	400,000,000							
PREFER	1,000,000							
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 1271 AVENUE OF THE AMERICAS</p> <p style="text-align: center;">CITY/ST/ZIP: NEW YORK, NY 10020</p>								
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: LORI SHER TITLE: ASST SECRETARY ADDRESS: 671 N GLEBE ROAD CITY/ST/ZIP/CO: ARLINGTON, VA 22203 </td> <td style="width: 50%; text-align: right; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: LORI SHER TITLE: ASST SECRETARY ADDRESS: 671 N GLEBE ROAD CITY/ST/ZIP/CO: ARLINGTON, VA 22203	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR				
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NICHOLAS A UTTON EVP, CMO 11271 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RONALD D FISHER DIRECTOR 1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KENNETH C GRIFFIN DIRECTOR 1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FREDERICK W KANNER DIRECTOR 1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL K PARKS DIRECTOR 1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LEWIS E RANDALL DIRECTOR 1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH M VELLI DIRECTOR 1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DONNA L WEAVER DIRECTOR 1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEPHEN H WILLARD DIRECTOR 1271 AVENUE OF THE AMERICAS NEW YORK, NY 10020	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NAVTEJ S. NANDRA PRESIDENT 1271 Avenue of the Americas, 14TH FLOOR NEW YORK , NY 10020	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ LORI SHER		LORI SHER, ASST SECRETARY	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		PRINTED NAME AND CORPORATE TITLE	
		DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			